

CALIFORNIA FORM FAIR POLITICAL PRACTICES COMMISSION

[] Candidate

Election Year ___

STATEMENT OF ECONOMIC INTERESTS

COVER PAGE

A Public Document - 5

(MIDDLE) DAYTIME TELEPHONE NUMBER ERIC Mar Lee

MAILING ADDRESS 6TREET CITY (Business Address Acceptable)	STATE ZIP CODE OPTIONAL: E-MAIL ADDRESS
1. Office, Agency, or Court	4. Schedule Summary
Name of Office Agency or Court Cuty and County of Sun Francisco	► Total number of pages including this cover page:
Division Board District if applicable: Board of Spewisors	► Check applicable schedules or "No reportable interests."
Your Position; Supervisor	I have disclosed interests on one or more of the attached schedules:
► If filing for multiple positions, list additional agency(ies)/ position(s): (Attach a separate sheet if necessary.)	Schedule A-1 Yes – schedule attached Investments (Less than 10% Ownership)
Agency: San Francisco Carry Wangertakan Monty	Schedule A-2 Yes – schedule attached Investments (10% or Greater Ownership)
Position: COMMISSIONEY	Schedule B Yes – schedule attached Real Property
2. Jurisdiction of Office (Check at least one box)	Schedule C Yes – schedule attached Income, Loans, & Business Positions (income Other than Gifts and Travel Payments)
State San Francisco County of San Francisco	Schedule D Yes – schedule attached Income – Gifts
City of San Van CISCO Multi-County	Schedule E Yes – schedule attached Income – Gifts – Travel Payments
Other	-or-
3. Type of Statement (Check at least one box)	No reportable interests on any schedule
Assuming Office Initial Date:/	5. Verification
Annual: The period covered is January 1, 2009, through December 31, 2009.	I have used all reasonable diligence in preparing this statement. I have reviewed this statement and to the best
-or-	of my knowledge the information contained herein and in any
O The period covered is/, through December 31, 2009.	attached schedules is frue and complete.
☐ Leaving Office Date Left:/// (Check one)	I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.
O The period covered is January 1, 2009, through the date of leaving office.	Date Signed 3 - 3 - 0
O The good severed to the lab	The state of the s
O The period devered is 1 / 1 is through the date of leaving office.	Signatu

SCHEDULE E Income – Gifts Travel Payments, Advances, and Reimbursements

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION	
Name	
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- Reminder you must mark the gift or income box.
- · You are not required to report income from government agencies.

ADDRESS (Business Address Acceptable) Thus with the state of the stat	NAME OF SOURCE YOU FT ALLEY SIX HOPENS ADDRESS; Business Address Acceptable) Candlestick Park 490 Jamustown April CIPTAND STATE JUN FVANCISIU, CA 94124 BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S) 11 /12/69 11 /16/69 AMT: \$ (0126.60	DATE(S):
TYPE OF PAYMENT: (must check one) Gift Income DESCRIPTION: 1111 U + 4 ALG PERTER 1281 W MSITUSS 1 12 12 U 1111 U 111 U 1111 U 111 U 1111 U 111 U 11 U 111 U 11 U 111 U 11	TYPE OF PAYMENT: (must check one) Digitt Income DESCRIPTION: 4 GIRLIA SCAVE & CLIEK
ALLY SURVEY STATE SURVEY SURVEY SURVEY SURVEY SURVEY SURVEY SURVEY BUSINESS ACTIVITY, IF ANY, OF SOURCE	► NAME OF SOURCE ADDRESS (Business Address Acceptable) CITY AND STATE BUSINESS ACTIVITY, IF ANY, OF SOURCE
DATE(S): 8 /28/69 / / AMT \$ 179.00	DATE(S) AMT. \$
TYPE OF PAYMENT (must check one) No Gift [] Income DESCRIPTION: Sift of two general JUNISSIGN + (Lift)	TYPE OF PAYMENT. (must check one) Gift Income DESCRIPTION:
Comments:	

Member, Board of Supervisors District 1

市多議員、第一區



City and County of San Francisco

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03/15/10

Listing of bodies Supervisor Eric Mar is a member of:

- -San Francisco Board of Supervisors
- -San Francisco Local Agency Formation Commission (LAFCO)
- -Bay Area Air Quality Management District (BAAQMD)
- -San Francisco First 5 Commission
- -San Francisco County Transportation Authority